ESC MO20000 1907

CONTACT PERSON:

ACCOUNT NO. : 07210000032	•
REFERENCE : 670472 5012985	02 17AL
AUTHORIZATION: Patucia Pui	A LEFT
COST LIMIT : \$ 125.00	ILED 22 PM
ORDER DATE : July 19, 2002 ORDER TIME : 10:13 AM	END I STATE
ORDER NO. : 670472-010	
CUSTOMER NO: 5012985 70000	6552937
CUSTOMER: Elliot H. Lutzker, Esq Snow Becker Krauss P.c. 605 Third Avenue	
New York, NY 10158-0125	
FOREIGN FILINGS	AL
NAME: LIFE SETTLEMENTS FUND I, LLC	. ***
XXXX QUALIFICATION (TYPE: <u>LL</u>)	1AI@ .0
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX PLAIN STAMPED COPY	RECEI 02 JUL 22 DIVISION OF CO

Ginger Simmons -- EXT# 1139

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	(Name of foreig	n lir	nited liability company)			
2 Delaware		2		 -1,,,	_	
(Jurisdiction un company is org	nder the law of which foreign limited liability (anized)) /	(FEI number, if applicable		<u> </u>	-
4. April 22, 200	2	-	Perpetual	No.	L/2	
	(Date of Organization)	, ,,	(Duration: Year limited liability compan	v will cea	ise to	-
			exist or "perpetual")		= 3	
Upon Qualific				宣芸		
	(Date first transacted business in Florida. (S	ee se	ections 608.501, 608.502, and 817.155, F.S) 골 룱	5	
7. 130 Gross Roa	ad, Suite 107, Kingsland, GA 31548					
-			· · · · · · · · · · · · · · · · · · ·			
	(Street addres	s of	principal office)			
If limited lie	hili t. ,	4				
. If infined ha	bility company is a manager-managed	d co	ompany, check here 🔀			
. The usual bu	siness addresses of the managing me	na la	C 11			
· III usuu, su	smoss addresses of the managing me.	11106	ers or managers are as follows:			
130 Gross Roa	ad, Suite 107, Kingsland, GA 31548					
						
						
		_				
) Attached is on or	riginal autiliants of mistress at a co					
e invisdiction under	riginal certificate of existence, no more than 90) day	s old, duly authenticated by the official havin	gcustody	ofrece	ords
instation of the cert	r the law of which it is organized. (A photocop ifficate under oath of the translator must be sub	oy is	not acceptable. If the certificate is in a foreign	ı language	e, a	
- Daniel Of the Cont	meate effect oantof the danslator must be sub	тнц	ea.)			
. Nature of bu	siness or purposes to be conducted or	r pr	omoted in Florida: To engage in any la	wful act	or	
activity for whic	th corporations may be organized under the O	Gene	eral Corn, Law of DE			
		_	A COLD. Daw of DE.		·	
	Alla () a	n)	l _c			
	Signature of a member or an au	tho	rized representative of a member.			
	(In accordance with section 608,408(3) F	9 +	the execution of this document constitutes			
	an affirmation under the penalties of perju	٠., ١	and exception of this document constitutes			

AmeriFirst Capital Corp. by: John Tooke

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:		02	
	Life Settlements Fund I, LLC		ي	_
2.	The name and the Florida street address of the registered agent and office are:		. 22 PH	FILED
	Corporation Service Company (Name)	LORIDA	<u></u>	
	-			
	Tallahassee FL 32301 (City/State/Zip)	<u>.</u>	-	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIFE SETTLEMENTS FUND I, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF JULY, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LIFE SETTLEMENTS FUND I, LLC" WAS FORMED ON THE TWENTY-SECOND DAY OF APRIL, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TANOT BEEN ASSESSED TO DATE.

OZOUL 22 FII I: 51

NAMAINISEL, FLORID



Warriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1893155

DATE: 07-19-02

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